POSITION'	INITIALS	ID NO.	DATE
FEE DETERMINATION	1 1 1 1		09-04-01
O.i.P.E. CLASSIFIER			
FORMALITY REVIEW	A-5	993	9-29-1
RESPONSE FORMALITY REVIEW	, ,		

INDEX OF CLAIMS					
V	Rejected	N	Non-elected		
	Allowed	I	Interference		
_	(Through numeral) Canceled	Α	Appeal		
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Claim Date	Claim / Date	Claim	Date
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If more than 150 claims or 10 actions staple additional sheet here